

<b>PAYMENT ESTIMATE - CONTRACT PERFORMANCE</b> For use of this form, see ER 37-2-10 and 37-345-10.					1. DATE _____		SHEET ____ of ____		
2. CONTRACTOR AND ADDRESS					3. CONTRACT NO.		4. DISTRICT		
5. DESCRIPTION OF WORK					6. APPROPRIATION AND PROJECT		7. REQUIRED COMPLETION DATE		
8. LOCATION			9. PERIOD COVERED BY THIS ESTIMATE FROM _____ THRU _____			10. JOB ORDER NO.		11. ESTIMATE NO.	
ITEM NO. a	DESCRIPTION b	CONTRACT				TOTAL TO DATE			
		QUANTITY AND UNIT c	UNIT PRICE d	AMOUNT e	QUANTITY AND UNIT f	AMOUNT g			
INCLUDES MODIFICATION THRU:				TOTAL CONTRACT —————→ \$		TOTAL EARNINGS TO DATE —————→ \$			
12. PRESENTED FOR PAYMENT				14 A. PREVIOUS DEDUCTIONS OTHER THAN RETAINED PERCENTAGE**					
PAYEE		PER		B. PREVIOUS RETAINED PERCENTAGE					
				C. PREVIOUS PAYMENTS					
				D. PREVIOUS EARNINGS (A + B + C)					
DATE		TITLE		E. EARNINGS THIS PERIOD (TOTAL EARNINGS TO DATE MINUS D)					
				F. LESS RETAINED PERCENTAGE					
				G. LESS DEDUCTION OTHER THAN					
13. APPROVED FOR PAYMENT				H. TOTAL DEDUCTIONS FOR THIS PERIOD (F + G)					
I CERTIFY that I have checked the quantities covered by this bill or estimate; that the work was actually performed; that the quantities are correct and consistent with all previous computations as actually checked; that the quantities and amounts are wholly consistent with the requirements of the contract or other instrument involved.				I. RETAINAGE REFUNDED					
				J. OTHER REFUNDS					
				K. TOTAL REFUNDS THIS PERIOD					
				L. AMOUNT DUE CONTRACTOR (E - H + K)					
				CONTRACTING OFFICER APPROVAL (Signature)		DATE		15. RECAPITULATION:	
				TOTAL RETAINED PCTG. (B + F - I)		TOTAL PAID (C + L)			